

ISSUE SLOP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.P.E. CLASSIFIER			
FORMALTY REVIEW	<i>[Signature]</i>	64934	01/20/01
RESPONSE FORMALTY REVIEW	<i>[Signature]</i>	64934	02/12/01

INDEX OF CLAIMS

✓ Rejected N Non-elected
 - Allowed I Interferences
 + (Through numeral) ... Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	7/9/04
2	✓	✓	5/18/06
3	✓	✓	5/18/06
4	✓	✓	5/18/06
5	✓	✓	5/18/06
6	✓	✓	5/18/06
7	✓	✓	5/18/06
8	✓	✓	5/18/06
9	✓	✓	5/18/06
10	✓	✓	5/18/06
11	✓	✓	5/18/06
12	✓	✓	5/18/06
13	✓	✓	5/18/06
14	✓	✓	5/18/06
15	✓	✓	5/18/06
16	✓	✓	5/18/06
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18	✓	✓	5/18/06
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25	✓	✓	5/18/06
26	✓	✓	5/18/06
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28	✓	✓	5/18/06
29	✓	✓	5/18/06
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44	✓	✓	5/18/06
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Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions
 staple additional sheet here

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Best Available Copy